

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Sarah PAC

ADDRESS (number and street)

PO Box 7711

☐Check if different
than previously
reported. (ACC)

Arlington

VA

22207

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00458588

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☒April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2010

through

03

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Timothy Crawford

Signature of Treasurer

Electronically Filed by Timothy Crawford

Date

04

13

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XN**
Transaction ID :

There were no fundraising expenses on behalf of any candidates. Sarah PAC did no public communication, no voter drive activity and no express advocacy.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Sarah PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		928436.61
(b) Cash on Hand at Beginning of Reporting Period	928436.61	
(c) Total Receipts (from Line 19)	400481.95	400481.95
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1328918.56	1328918.56
7. Total Disbursements (from Line 31)	409760.06	409760.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	919158.50	919158.50
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Sarah PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	194061.51	194061.51
(ii) Unitemized	204420.44	204420.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)	398481.95	398481.95
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	400481.95	400481.95
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	400481.95	400481.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	400481.95	400481.95

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	400260.06	400260.06	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	400260.06	400260.06	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	9500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	409760.06	409760.06	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	409760.06	409760.06	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	400481.95	400481.95
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	400481.95	400481.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	400260.06	400260.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	400260.06	400260.06

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

John H Chapman

Mailing Address 2104 Austin Court

City

Richland

State

WA

Zip Code

99354-2750

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	0

Transaction ID: AFCE3F1FDE98045B691B

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Kenneth Corbin

Mailing Address P.O. Box 580

City

Iowa City

State

IA

Zip Code

52244-0580

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Iowa

Occupation

Medical Transcriptionist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	0

Transaction ID: A27FB4DAD06494342B76

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Gerald Kirke

Mailing Address 5465 Mills Civic Parkway
Suite 400

City

West Des Moines

State

IA

Zip Code

50266-5321

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kirke Financial

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	0

Transaction ID: A41A8F80C196C434DA9F

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Susan Meurer

Mailing Address 12311 Longmeadow Way

City

Bakersfield

State

CA

Zip Code

93312-4673

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
retired R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	0

Transaction ID: A327312CAF2724C3F946

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

ATTILA KOVACS

Mailing Address 397 HIGH ST
6

City

Enola

State

PA

Zip Code

17025-3245

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Technologies-Sikor-
sky Global HeOccupation
aircraft mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	0

Transaction ID: AE7F48FDBD25F40F1ABA

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

David Slear

Mailing Address 154 Powell place road

City

Tabernacle

State

NJ

Zip Code

08088-9732

FEC ID number of contributing
federal political committee.

C

Name of Employer
LonewolfsynergiesOccupation
Construction/Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	0

Transaction ID: A70B4AD90FCC4485EBA1

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Gary Salisbury

Mailing Address 151 Hempstead 19

City

Hope

State

AR

Zip Code

71801-9514

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fikes Truck Line

Occupation

president and ceo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 0

Transaction ID: A0CF5C202C6614570832

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Donna Maxwell

Mailing Address 1525 Hickory Street

City

Abilene

State

TX

Zip Code

79601-2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dr Mark Maxwell

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 0

Transaction ID: A39610480A9CF4A059AF

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Frank Whitcomb

Mailing Address 354 Bay Point Rd.

City

Sunapee

State

NH

Zip Code

03782-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frank W. Whitcomb Const.
Corp.

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 1 0

Transaction ID: A3B566C54F7424F8993F

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Carol Carlsen

Mailing Address 31 Meadowbrook Drive

City

Huntington Station

State

NY

Zip Code

11746-2947

FEC ID number of contributing
federal political committee.

C

Name of Employer
NSUH @ Plainview

Occupation

Registered Nurse

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	0

Transaction ID: A28C860777B2C405EA30

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth Marquis

Mailing Address 1609 Inverness Blvd

City

Rawlins

State

WY

Zip Code

82301-4566

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sweatwater Co.Memorial Ho-
spital

Occupation

Registered Nurse

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	1	0

Transaction ID: AD044ED47214444AAA6B

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Gregory Hall

Mailing Address 16319 Kyle Crest Tr

City

Cypress

State

TX

Zip Code

77433-5860

FEC ID number of contributing
federal political committee.

C

Name of Employer
DSI International

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	1	0

Transaction ID: A02D78F3F4AF947D39AD

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

william vanderpol

Mailing Address 970e 3700n

City

Castleford

State

ID

Zip Code

83321-6460

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
dairyfarmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 6 / 2 0 1 0

Transaction ID: A33F4DB95231147159C8

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

glen black

Mailing Address 2200 west clearvue ct.

City

Eagle

State

ID

Zip Code

83616-6942

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 6 / 2 0 1 0

Transaction ID: AEC3204E775D844CDA91

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Beverly Nelson

Mailing Address 2062 Berks Rd.

City

Lansdale

State

PA

Zip Code

19446-5928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nelson Steel Prods.Inc.

Occupation
PART OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 0

Transaction ID: AAADDF14B77B74359947

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

John Pennington

Mailing Address 2705 Rincon Drive

City

Grand Junction

State

CO

Zip Code

81503-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Directional Driller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 0

Transaction ID: A3C7E569F523D4597B69

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

michael porcaro

Mailing Address po box 276

City

Itasca

State

IL

Zip Code

60143-0276

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 8 / 2 0 1 0

Transaction ID: A96EF0838A98341F48A5

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Harry Smith

Mailing Address 681 VOA Site C Rd

City

Greenville

State

NC

Zip Code

27834-7086

FEC ID number of contributing
federal political committee.

C

Name of Employer
Flanders Corp

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 8 / 2 0 1 0

Transaction ID: A081EF7CF91AD43EFAE2

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

E D McDonald

Mailing Address 20 Landsdowne Lane

City

Rochester

State

NY

Zip Code

14618-3846

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 8 / 2 0 1 0

Transaction ID: AE930B7EE45124CCC915

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Robert Perry

Mailing Address 12039 Alta Sierra Dr

City

Grass Valley

State

CA

Zip Code

95949-6529

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 0

Transaction ID: ABC5EFC3C70F343C485C

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

jerry Lausmann

Mailing Address 115 Stewart Ave
115 Stewart Ave

City

Medford

State

OR

Zip Code

97501-3607

FEC ID number of contributing
federal political committee.

C

Name of Employer
kogap ent. inc.

Occupation
pres.ceo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 6 / 2 0 1 0

Transaction ID: A7E2038C51456404C804

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

james heatherly

Mailing Address 80 earl caldwell dr

City

Guntersville

State

AL

Zip Code

35976-8623

FEC ID number of contributing
federal political committee.

C

Name of Employer
pilgrims pride

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	1	0

Transaction ID: AD506DF35C6B04540B96

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

William Dadasis

Mailing Address 35 Sullivan Way

City

Canton

State

MA

Zip Code

02021-1687

FEC ID number of contributing
federal political committee.

C

Name of Employer
JPA Corp

Occupation

management/owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	1	0

Transaction ID: A809FC33031E64B1E83C

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Daniel Johnson

Mailing Address 30131 312th Way SE

City

Ravensdale

State

WA

Zip Code

98051-9751

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	7	/	2	0	1	0

Transaction ID: ACE3C79A70CD94892B4A

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Richard Peterson

Mailing Address 2500 N. Lakevies Ave.
1101

City State Zip Code
Chicago IL 60614-1846

FEC ID number of contributing
federal political committee.

C

Name of Employer
R.B. Peterson & Co.LLC.

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 8 / 2 0 1 0

Transaction ID: A5095FB8CB7A54084855

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gareld L Bilyew

Mailing Address 1719 E. 935th Ave.

City State Zip Code
Oblong IL 62449-3307

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pump Repair Specialist,
Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 9 / 2 0 1 0

Transaction ID: A5E66C6C617F5448ABBE

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Joe Knox

Mailing Address 1325 S. Dixieland Rd
Lot 216

City State Zip Code
Harlingen TX 78552-3316

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 1 0

Transaction ID: A7C7A09D8990048F5A4D

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Nancy Punola

Mailing Address 210 Central Ave.

City

Madison

State

NJ

Zip Code

07940-1611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 1 0

Transaction ID: A90C76FF2F1AF4C34981

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

Lake Oswego

State

OR

Zip Code

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 1 0

Transaction ID: A3E0224FA490F4011B5B

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Oleg Gielman

Mailing Address 1017 156th Ave., NE #2

City

Bellevue

State

WA

Zip Code

98007-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metro King County

Occupation

bus driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 1 0

Transaction ID: A3C751DAD144741BAA7E

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

William Reynolds

Mailing Address 3708 Favero Road

City

Henrico

State

VA

Zip Code

23233-7037

FEC ID number of contributing
federal political committee.

C

Name of Employer
CB Richard Ellis of Virgi-
nia, Inc.

Occupation

Commercial Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 0

Transaction ID: AB26604B8F04B430895E

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Caroline Hoffman

Mailing Address 205 West Lyon Farm Drive

City

Greenwich

State

CT

Zip Code

06831-4353

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 0

Transaction ID: AA06F549CD83844CE832

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Kenneth Higgins

Mailing Address 650 25th Street Nw
100

City

Cleveland

State

TN

Zip Code

37311-1353

FEC ID number of contributing
federal political committee.

C

Name of Employer
Santek Environmental

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 1 0

Transaction ID: A7EAE2848A62440FBB89

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Fred Dettwiller

Mailing Address 301 Great Circle Rd.

City

Nashville

State

TN

Zip Code

37228-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Det Distributing

Occupation

Beer Wholesaler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 0

Transaction ID: A38222BBAA73F4D48BBA

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Harold Miller

Mailing Address 2126 Dewyse Rd.

City

Bay City

State

MI

Zip Code

48708-9122

FEC ID number of contributing
federal political committee.

C

Name of Employer
na

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 0

Transaction ID: AB01AE09D5D644ECAA89

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

john ames

Mailing Address 5547 hiway 85

City

Williston

State

ND

Zip Code

58801-8901

FEC ID number of contributing
federal political committee.

C

Name of Employer
agri industries inc.

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 0

Transaction ID: A1FCDD0B01C424852955

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Oleg Gielman

Mailing Address 1017 156th Ave., NE #2

City

Bellevue

State

WA

Zip Code

98007-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metro King County

Occupation
bus driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 0

Transaction ID: A8F4D5DC3283045E984E

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Linda Howard

Mailing Address 3333 Fairfield Pike

City

Bell Buckle

State

TN

Zip Code

37020-4206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Adams Reese

Occupation
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 0

Transaction ID: A0EAD3335ABF5421AABB

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

John Rich

Mailing Address 900 Division Street

City

Nashville

State

TN

Zip Code

37203-4111

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Entertainer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 1 0

Transaction ID: AFAADD54942F64D1B976

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Douglas Howard

Mailing Address 3333 Fairfield Pike

City

Bell Buckle

State

TN

Zip Code

37020-4206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Disney Music

Occupation
Sr. VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 1 0

Transaction ID: A3CF4BE4FC4A64D4B821

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Johnny Grice

Mailing Address 7804 Kristina Ln

City

Frisco

State

TX

Zip Code

75034-5478

FEC ID number of contributing
federal political committee.

C

Name of Employer
AtHome Healthcare

Occupation
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 1 0

Transaction ID: A49646CEBA3A74EC8ACF

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Lee Beaman

Mailing Address 1525 Broadway

City

Nashville

State

TN

Zip Code

37203-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beaman Automotive

Occupation
Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 1 0

Transaction ID: AF3DA4115155349518E4

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Joe Gregory

Mailing Address 351 Main Street

City

Piney Flats

State

TN

Zip Code

37686-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gregory Mgmt. Co. LLCOccupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	0

Transaction ID: A49AC28F06F794378900

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

D. Tate Rich

Mailing Address 600 Cantrell Ave.

City

Nashville

State

TN

Zip Code

37215-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	0

Transaction ID: AD0419E3DA18147A8A3D

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Frank Whitcomb

Mailing Address 354 Bay Point Rd.

City

Sunapee

State

NH

Zip Code

03782-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frank W. Whitcomb Const.
Corp.Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	0

Transaction ID: A33E32DF54A4C4216AF5

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Cindy Gregory

Mailing Address 351 Main St.

City

Piney Flats

State

TN

Zip Code

37686-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

None

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	0

Transaction ID: A73A8E10A799F44E580A

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Cecil Elliott

Mailing Address 8990 Manchester Pike

City

Christiana

State

TN

Zip Code

37037-5902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	0

Transaction ID: ACBE9E2A7B2C8421DAE7

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Kelley Beaman

Mailing Address 837 Glen Leven Drive

City

Nashville

State

TN

Zip Code

37204-4323

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	0

Transaction ID: A3CF175411F1C44528C5

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Patricia Phaneuf

Mailing Address 5605 W. Orlando Circle

City

Broken Arrow

State

OK

Zip Code

74011-1158

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
none

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 1 0

Transaction ID: AFE109F7C955449958B3

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

dwaine coates

Mailing Address 16052 waikiki lane
c

City

Huntington Beach

State

CA

Zip Code

92649-2334

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boeing

Occupation
Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 1 0

Transaction ID: A92156B8B2B9B4401879

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

BC Scooter Clippard

Mailing Address 2315 Abbott Martin Rd.

City

Nashville

State

TN

Zip Code

37215-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
investor

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 1 0

Transaction ID: AB363650397724CDBB7C

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

H. Lynn Greer

Mailing Address 5137 Boxcroft Pl.

City

Nashville

State

TN

Zip Code

37205-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lynn Investment Co.Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	0

Transaction ID: A3B1A7372AFFE4E65961

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Charles Hand, Sr.

Mailing Address PO Box 30789

City

Clarksville

State

TN

Zip Code

37040-0014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Budweiser of HopkinsvilleOccupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	0

Transaction ID: AB46A6F40B3EA400B934

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Albert McCall

Mailing Address 3773 Big Springs Rd.

City

Lebanon

State

TN

Zip Code

37090-9515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Occupation
merchant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	0

Transaction ID: AFC04C6F6C4764157B70

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Charles Hand, Jr.

Mailing Address PO Box 30789

City

Clarksville

State

TN

Zip Code

37040-0014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Budweiser of Chattanooga

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 1 0

Transaction ID: A2AE5974CD9964FDF812

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Jon Yarbrough

Mailing Address 4431 Dyke Bennett

City

Franklin

State

TN

Zip Code

37064-7602

FEC ID number of contributing
federal political committee.

C

Name of Employer
VGT Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 1 0

Transaction ID: AC43781C871844C5E85E

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Tom West

Mailing Address 27 Stonebridge Cr.
27 Stonebridge Cr.

City

Wichita

State

KS

Zip Code

67230-1560

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morgan Stanley Smith Barn-
ey

Occupation
financial advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 0

Transaction ID: A949890CBBDD4435AA18

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Peter Elebash

Mailing Address 529 S. Flager Dr
11 F

City State Zip Code
West Palm Beach FL 33401-5930

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Elebash Company

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: ABF66A8D03F974F7DA52

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Harvey Horowitz

Mailing Address 239 East 79th Street

City State Zip Code
New York NY 10075-0810

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: AE54B374001954B6197B

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

peter damour

Mailing Address 880 W. 56th St
880 W. 56th St

City State Zip Code
Indianapolis IN 46228-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer
indiana radiology associa-
tes

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: A8297B6EEDD9D48318BB

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

ROBERT SHELTON

Mailing Address 2812 MERLE AVE

City

Modesto

State

CA

Zip Code

95355-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer
disabled/retired

Occupation

Disabled Veteran

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: A2F14754DBE5D43E0AEC

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

John Place

Mailing Address 270 Areny Ct

City

Danville

State

CA

Zip Code

94506-2060

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: AE53DB0F67DCB4FC68A5

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Robert Williams

Mailing Address 13813 Turkey Foot Rd

City

North Potomac

State

MD

Zip Code

20878-3935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Water Savings Inc

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: A515AD619FC014908A67

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Paul Rumley

Mailing Address 165 Winding Way

City

Haddonfield

State

NJ

Zip Code

08033-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	1	0

Transaction ID: A3C93D315901F4439B2E

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Larry Cheng

Mailing Address 6611 N Saint Catherine CT

City

Fresno

State

CA

Zip Code

93711-1296

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	1	0

Transaction ID: AA716051FCA1C4198BB6

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Penny Minnick

Mailing Address 8007 Kempwood Drive

City

Houston

State

TX

Zip Code

77055-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employedOccupation
music

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	1	0

Transaction ID: A04F6E266B4434100AC5

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

John Foraker

Mailing Address 854 A Street

City

Davis

State

CA

Zip Code

95616-1917

FEC ID number of contributing
federal political committee.

C

Name of Employer
Annie's, Inc

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: AB67204511DAC4EFE97F

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

john coates

Mailing Address 7714 mckee road

City

Rougemont

State

NC

Zip Code

27572-8303

FEC ID number of contributing
federal political committee.

C

Name of Employer
jcelectric inc

Occupation
electrician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: AD4FB97828AED4FC6915

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Richard Peterson

Mailing Address 2500 N.Lakeview
1101

City

Chicago

State

IL

Zip Code

60614-1846

FEC ID number of contributing
federal political committee.

C

Name of Employer
R.B. Peterson & Co.LLC.

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: A3A88EEEDDD9646928E8

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

Lake Oswego

State

OR

Zip Code

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: A39891AF361E748EBAC5

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Bonnie Zylstra

Mailing Address 14745 Merriltown Rd Apt 5624

City

Austin

State

TX

Zip Code

78728-5765

FEC ID number of contributing
federal political committee.

C

Name of Employer
Internal Revenue Service

Occupation
Tax Examiner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 0 / 2 0 1 0

Transaction ID: A83799EF58CC94644ADF

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Diane Thilmont

Mailing Address 1924 S.W. 21st Terrace

City

Miami

State

FL

Zip Code

33145-2612

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 0 / 2 0 1 0

Transaction ID: A5C5B67DA0AC043BFA79

Amount of Each Receipt this Period

46.00

SUBTOTAL of Receipts This Page (optional)

696.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Sharon Kuhn

Mailing Address 215 South Water Street

City

New Oxford

State

PA

Zip Code

17350-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gettysburg College

Occupation

Office Clerk

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	0	/	2	0	1	0

Transaction ID: A78F200C3701547ADA3E

Amount of Each Receipt this Period

146.00

B.

Full Name (Last, First, Middle Initial)

Oleg Gielman

Mailing Address 1017 156th Ave., NE #2

City

Bellevue

State

WA

Zip Code

98007-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metro King County

Occupation

bus driver

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	1	/	2	0	1	0

Transaction ID: AFD94820F8A6D4B818C9

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Rufus Lumry

Mailing Address 305 111th Avenue NE
B

City

Bellevue

State

WA

Zip Code

98004-5875

FEC ID number of contributing
federal political committee.

C

Name of Employer
Acorn Advisors

Occupation

President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	1	/	2	0	1	0

Transaction ID: ABD916EEE3A9742F9B58

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Richard Foster

Mailing Address 9513 Perimeter St.

City

Denton

State

TX

Zip Code

76207-6669

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 1 / 2 0 1 0

Transaction ID: AD5A321119ED54FD2814

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Jeanene Van Zandt

Mailing Address 4659 Poplar Wood Road

City

Smyrna

State

TN

Zip Code

37167-5712

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
music publisher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 1 / 2 0 1 0

Transaction ID: A2AF77480C0DA437D8B5

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

Lake Oswego

State

OR

Zip Code

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 1 / 2 0 1 0

Transaction ID: A9C319ECF61DE49678AC

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

William Ritchie

Mailing Address 5302 Brookeway Dr

City

Bethesda

State

MD

Zip Code

20816-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 1 / 2 0 1 0

Transaction ID: AC13EB75E3D3A45448F4

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

D. Mark Murphy

Mailing Address PO Box 731716

City

Ormond Beach

State

FL

Zip Code

32173-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-

Occupation
dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: A19534A5D2EA64E14B20

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

carol adams

Mailing Address 8409 Pickwick Lane
245

City

Dallas

State

TX

Zip Code

75225-5323

FEC ID number of contributing
federal political committee.

C

Name of Employer
na

Occupation
NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: A21DB794F5DD4BC7AD5

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

John Padgett

Mailing Address 505 Granny White Pike

City

Brentwood

State

TN

Zip Code

37027-5743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Modern Marine Corp.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: A64597531D6B64625A63

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Patricia Theryoung

Mailing Address 11209 Orange Hibiscus Lane
130 Via Palacio

City

Palm Beach Gardens

State

FL

Zip Code

33418-1515

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: AFC46E115D06F40A190C

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

BC Scooter Clippard

Mailing Address 2315 Abbott Martin Rd.

City

Nashville

State

TN

Zip Code

37215-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2718.51

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 1 0

Transaction ID: A694025DF860349CF929

Amount of Each Receipt this Period

1718.51

In-kind: In-kind food and
drink

SUBTOTAL of Receipts This Page (optional)

4468.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Sondra Nodvin

Mailing Address 5175 Cantrell Road

City

Dawsonville

State

GA

Zip Code

30534-4843

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 1 0

Transaction ID: AD82F6259A6CD40D7916

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mayda Arias

Mailing Address 2611 NE 52 Court

City

Lighthouse Point

State

FL

Zip Code

33064-7065

FEC ID number of contributing
federal political committee.

C

Name of Employer
SouthEast Florida Heme-Onc
Group, self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 0

Transaction ID: AFB2CBBCF823843E8B04

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Ann Carmichael

Mailing Address 204 Cardinal Glen Circle

City

Sterling

State

VA

Zip Code

20164-5505

FEC ID number of contributing
federal political committee.

C

Name of Employer
not employed

Occupation

NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 0

Transaction ID: A2986E03D3D2547A9AFA

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Oleg Gielman

Mailing Address 1017 156th Ave., NE #2

City

Bellevue

State

WA

Zip Code

98007-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metro King CountyOccupation
bus driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	8	/	2	0	1	0

Transaction ID: AFC5427AB77714B828B4

Amount of Each Receipt this Period

1.00

B.

Full Name (Last, First, Middle Initial)

Gary Grabe

Mailing Address 1076 Shockney Drive

City

Ormond Beach

State

FL

Zip Code

32174-3325

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/aOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	8	/	2	0	1	0

Transaction ID: AAEB6EDC7D3EB4510939

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Max Rugemar

Mailing Address 9302 Lee Highway
Suite 302

City

Fairfax

State

VA

Zip Code

22031-1214

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	8	/	2	0	1	0

Transaction ID: A577FE8796B674930A8B

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

501.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Dennis Dukes

Mailing Address 1409 NE Mullet Lake

City

Indian River

State

MI

Zip Code

49749-9121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	1	0

Transaction ID: A3924DA9E5EBF4037A5A

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

David Teague

Mailing Address 10712 N. Iroquois Dr.

City

Spokane

State

WA

Zip Code

99208-9114

FEC ID number of contributing
federal political committee.

C

Name of Employer
D & T Funding, Inc.Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	1	0

Transaction ID: A178E1B5B4DF142B4B1C

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Beverly Nelson

Mailing Address 2062 Berks Rd.

City

Lansdale

State

PA

Zip Code

19446-5928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nelson Steel Prods.Inc.Occupation
PART OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	1	0

Transaction ID: ADC49D1763DA047DEA73

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Ronald Cameron

Mailing Address PO Box 21440

City

Little Rock

State

AR

Zip Code

72221-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mountaire Corp.

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 1 0

Transaction ID: AC2E9BDBDF50948C2860

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Mr. Henry Logan, III

Mailing Address 13 Atwater Road

City

Chadds Ford

State

PA

Zip Code

19317-9111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired from ICI Americas

Occupation
Retired Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 0

Transaction ID: A849490DB8C0648E1B4C

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Richard Griffith

Mailing Address 3417 Milam St

City

Houston

State

TX

Zip Code

77002-9531

FEC ID number of contributing
federal political committee.

C

Name of Employer
Richard S Griffith

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 0

Transaction ID: A7CC766A01F2A4DEB9B7

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Thomas Smith

Mailing Address 4533 Shys Hill Road

City

Nashville

State

TN

Zip Code

37215-3915

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation

Self-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 5 / 2 0 1 0

Transaction ID: AFE35F49D12274FD085D

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Rodney Daw

Mailing Address 3614 Lynn Rd

City

Raleigh

State

NC

Zip Code

27613-3833

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 5 / 2 0 1 0

Transaction ID: A0240BE6A37C5442AB77

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Mr. Henry Logan, III

Mailing Address 13 Atwater Road

City

Chadds Ford

State

PA

Zip Code

19317-9111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired from ICI Americas

Occupation

Retired Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: ABA2E75ACD7674BDABDD

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

George Maxwell

Mailing Address 7740 Country Creek Dr.

City

Longmont

State

CO

Zip Code

80503-7228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: AE58A9D04877440CA89A

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Rhonda Hendrix

Mailing Address 6690 E Egypt Rd

City

Milburn

State

OK

Zip Code

73450-9550

FEC ID number of contributing
federal political committee.

C

Name of Employer
Indian Territory Home Health-
& Hosp

Occupation

Nurse Practitioner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: AE5FD9C22E17B43C19AE

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Rebecca Sugden

Mailing Address 2150 Kurt Court

City

Apopka

State

FL

Zip Code

32703-9405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 0

Transaction ID: A9675FBBA6F154ED9BFA

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Harold Miller

Mailing Address 2126 Dewyse Rd.

City

State

Zip Code

Bay City

MI

48708-9122

FEC ID number of contributing
federal political committee.

C

Name of Employer
na

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 0

Transaction ID: A1827B00B4AFD4B6497D

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Phil de Montmollin

Mailing Address 394 N. Main Street

City

State

Zip Code

Rutherfordton

NC

28139-2446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 1 0

Transaction ID: A1D4E1163FB3F4D23A54

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mary Belle Snow

Mailing Address 1482 East Valley Road #215

City

State

Zip Code

Santa Barbara

CA

93108-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 0

Transaction ID: A6CD171280E734A8887A

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Keith Elliott

Mailing Address Apt 639

N78 W17331 Wildwood Dr

City

State

Zip Code

Menomonee Falls

WI

53051-4163

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 0

Transaction ID: A871E4D1F85C34C2EA72

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Charles Black

Mailing Address 11821 Cassandra St. Unit 201

City

State

Zip Code

New Port Richey

FL

34654-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 0

Transaction ID: ADA12EA32145641A0994

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

State

Zip Code

Lake Oswego

OR

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 0

Transaction ID: A47A3A6C7E58E4B55B84

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

edmund kaim

Mailing Address 2017 merrimac dr

City

Stafford

State

VA

Zip Code

22554-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID: AD41AF4F8C5404A53A38

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Delbert Driskill

Mailing Address 5714 Gabor Drive

City

San Antonio

State

TX

Zip Code

78240-3407

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired Admin-Providence HS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID: A78D4909003444124B49

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Cline Handy

Mailing Address 1841 Amalfi Dr.

City

Encinitas

State

CA

Zip Code

92024-1285

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID: A6B9B441AEF934B4F8F2

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

William Ritchie

Mailing Address 5302 Brookeway Dr

City

Bethesda

State

MD

Zip Code

20816-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

N/A

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: A8EB4E842DD584BDF8AE

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Frank Whitcomb

Mailing Address 354 Bay Point Rd.

City

Sunapee

State

NH

Zip Code

03782-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frank W. Whitcomb Const.
Corp.

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: AF5F7A0E476014DB5A6F

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Susan Myshka

Mailing Address 2817 South Caraway Rd

City

Jonesboro

State

AR

Zip Code

72401-7305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Myshka Clinic, PS

Occupation

chiropractor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: A423A3EAAE647490EB37

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Diane Thilmont

Mailing Address 1924 S.W. 21st Terrace

City

Miami

State

FL

Zip Code

33145-2612

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: AB3E5920649594EE4A8B

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

jo orzechowski

Mailing Address 2987 Franklin Oaks Dr

City

Herndon

State

VA

Zip Code

20171-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
homemaker

Occupation
N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: AF23D2C39413E41FD89F

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

jon sprinkle

Mailing Address 299 jewel rd

City

Lufkin

State

TX

Zip Code

75904-8416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sound Techs

Occupation
sound eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: A12486128ECC54CD68C6

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

mike speeney

Mailing Address 855 tower view circle

City

New Hope

State

PA

Zip Code

18938-9400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Presto tape co

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: A63BAC92654144E808A0

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Henry Logan, III

Mailing Address 13 Atwater Road

City

Chadds Ford

State

PA

Zip Code

19317-9111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired from ICI Americas

Occupation

Retired Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: A1EA610455BBB4951909

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

RONALD CRESSWELL

Mailing Address 1968 BOULDER DR

City

Ann Arbor

State

MI

Zip Code

48104-4164

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: A532557A780034D65B4E

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Nancy Windsor

Mailing Address 111 Crescent

City

Boonville

State

MO

Zip Code

65233-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer
PBMS, LLC

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	1	0

Transaction ID: A908F8172EE1645619D9

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Christopher May

Mailing Address 14627 E. Paradise Dr.

City

Fountain Hills

State

AZ

Zip Code

85268-6157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southwest Diagnostic Imag-
ingOccupation
radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	1	0

Transaction ID: A9F3FB893AAD34A24A72

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Ralph Brown

Mailing Address 7509 Flagstone Street

City

Fort Worth

State

TX

Zip Code

76118-6953

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capellon Partners

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	1	0

Transaction ID: A4056ED95461C4A9DAC8

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Ralph Brown

Mailing Address 7509 Flagstone Street

City

Fort Worth

State

TX

Zip Code

76118-6953

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capellon Partners

Occupation

Administrator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID: A38473300E6F54CA9817

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Gunnvor Tveidt

Mailing Address 4114 198th St SW

City

Lynnwood

State

WA

Zip Code

98036-6742

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Business Owner

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID: A60A354D477744868BFC

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

drew sikorski

Mailing Address 4637 willowgrove Drive

City

Ellicott City

State

MD

Zip Code

21042-5947

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Home Builder

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID: AAA1A5375CC154B29B90

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Jeanene Van Zandt

Mailing Address 4659 Poplar Wood Road

City

Smyrna

State

TN

Zip Code

37167-5712

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
music publisher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: AF5E31A49C89F40B0B69

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

Lake Oswego

State

OR

Zip Code

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 1 0

Transaction ID: A871DC5D8A35D4A2D9B8

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Cheryl Dunson

Mailing Address 327 Mikel Road

City

Cleveland

State

TN

Zip Code

37323-8463

FEC ID number of contributing
federal political committee.

C

Name of Employer
na

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 1 0

Transaction ID: A43B7D4F87FE24FB69F2

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Calvin Yaden

Mailing Address 2976 East 7th Street

City

Oakland

State

CA

Zip Code

94601-2834

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 1 0

Transaction ID: A51EB872C98674BC083B

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

Lake Oswego

State

OR

Zip Code

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 4 / 2 0 1 0

Transaction ID: ACEBD0BCA917B4C7DABC

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Henry Logan, III

Mailing Address 13 Atwater Road

City

Chadds Ford

State

PA

Zip Code

19317-9111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired from ICI Americas

Occupation
Retired Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 6 / 2 0 1 0

Transaction ID: A776AE2B0847449C4A80

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Nancy Reller

Mailing Address 7074 Fairway Pl.

City

Carmel

State

CA

Zip Code

93923-9589

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/a

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 0

Transaction ID: A2A5568208E3F4A8CA36

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

James Hooten

Mailing Address 7939 Atwater Ln
101

City

Memphis

State

TN

Zip Code

38119-9189

FEC ID number of contributing
federal political committee.

C

Name of Employer
phm

Occupation

Courier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 0

Transaction ID: A3F0B0D6370C44A8795D

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

James Hooten

Mailing Address 7939 Atwater Ln
101

City

Memphis

State

TN

Zip Code

38119-9189

FEC ID number of contributing
federal political committee.

C

Name of Employer
phm

Occupation

Courier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 0

Transaction ID: A252D830EBBF6408FA15

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Tatjana Nenadovich

Mailing Address 100 Muirfield Dr

City

Valparaiso

State

IN

Zip Code

46385-6277

FEC ID number of contributing
federal political committee.

C

Name of Employer
home

Occupation

stay home mom

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	1	0

Transaction ID: AD6D4E17E5F7045DEB73

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Deborah Palmer

Mailing Address 775 Twin Oaks Drive Apt 4

City

Decatur

State

GA

Zip Code

30030-4027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pediatrix Medical Group

Occupation

Physician Assistant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	1	0

Transaction ID: A80C6DDC5EA124074A3E

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Dennis Bailey

Mailing Address 1255 N hamilton Rd #224

City

Columbus

State

OH

Zip Code

43230-6785

FEC ID number of contributing
federal political committee.

C

Name of Employer
M/I Homes Corporation

Occupation

Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	1	0

Transaction ID: AA972B459712342EEB35

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Carolyn S Keller

Mailing Address PO Box 542

City

Akron

State

CO

Zip Code

80720-0542

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	1	0

Transaction ID: AC200F5C3E09849FF89A

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

F Imogene White, M.D.

Mailing Address 10 East Steele Street

City

Orlando

State

FL

Zip Code

32804-3923

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	0

Transaction ID: A7EE9899D401D4A009B3

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Gregory Hall

Mailing Address 16319 Kyle Crest Tr

City

Cypress

State

TX

Zip Code

77433-5860

FEC ID number of contributing
federal political committee.

C

Name of Employer
DSI International

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	0

Transaction ID: AF1753189866041A4AB7

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Deborah Palmer

Mailing Address 775 Twin Oaks Drive Apt 4

City State Zip Code
 Decatur GA 30030-4027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pediatrix Medical Group

Occupation
Physician Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 1 0

Transaction ID: A5E4EC98680C447D6949

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Bruce Garrick

Mailing Address 7825 E Newton St

City State Zip Code
 Tulsa OK 74115-6933

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dollar/Thrifty

Occupation
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 1 0

Transaction ID: A6FC95ED8304D424394A

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Vernon Jewkes

Mailing Address 2700 Savage rd

City State Zip Code
 Elizabeth CO 80107-8466

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
non e

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 1 0

Transaction ID: A60EFD203F4EB4C5BAB4

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

rhett anthony

Mailing Address 12 crooked creek

City

Hattiesburg

State

MS

Zip Code

39402-7766

FEC ID number of contributing
federal political committee.

C

Name of Employer
govt

Occupation
govt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: A582AC9B196C540FC9DD

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Larry Manley

Mailing Address 9140 HWY 6 N

City

Houston

State

TX

Zip Code

77095-2478

FEC ID number of contributing
federal political committee.

C

Name of Employer
Manley Companies

Occupation
Developer - Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: AD230961926B14A84BD7

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

John Collins

Mailing Address 12950 Walnut Road

City

Elm Grove

State

WI

Zip Code

53122-1826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Criticare Systems Inc.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: ACE126C676994466DB4E

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Jerry Culbertson

Mailing Address P.O. Box 700

City

Roslyn

State

WA

Zip Code

98941-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
metal recycler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: A32742A5FCE224399BCA

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Joan Hoffpaur

Mailing Address 101 Hollywood Dr.
mad as hell

City

Metairie

State

LA

Zip Code

70005-3917

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scully, Sartin, Scioneaux
APMC (Pathol

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: A92B71573FB8548D08EE

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Sharon Schwarz

Mailing Address 3530 Perignon Place

City

Cincinnati

State

OH

Zip Code

45226-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: AE439EDF41350497FACA

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

kenneth stutzman

Mailing Address 214 w 5th st

City

Mount Carmel

State

PA

Zip Code

17851-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. Army RetiredOccupation
retired mil

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

Transaction ID: A2475F63526F24E65B73

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Robert Paul

Mailing Address 600 Long Cove Drive

City

Lake In The Hills

State

IL

Zip Code

60156-5931

FEC ID number of contributing
federal political committee.

C

Name of Employer
DeVry UniversityOccupation
VP of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

Transaction ID: A42A5479E33014FCE8B7

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Edward Guercio

Mailing Address 400E 85th Street
Apt 15G

City

New York

State

NY

Zip Code

10028-6303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Renaissance Technologies
LLCOccupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

Transaction ID: A6931309937EE4FE3B2B

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Diane Thilmont

Mailing Address 1924 S.W. 21st Terrace

City

Miami

State

FL

Zip Code

33145-2612

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

Transaction ID: A1599FE5A53F44FD5887

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

John Beattie

Mailing Address 331 N Hague Ave

City

Columbus

State

OH

Zip Code

43204-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

Transaction ID: A79557B6F05894CE4AB1

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Gilbert Anthony

Mailing Address 10598 Huntersfield Drive

City

Carmel

State

IN

Zip Code

46032-9452

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

Transaction ID: A9AEAC09140504AC8B32

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Sharon Kuhn

Mailing Address 215 South Water Street

City

New Oxford

State

PA

Zip Code

17350-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gettysburg College

Occupation

Office Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: AA0974AF659004FF9B89

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Kathleen Hanko

Mailing Address 1011 Guthrie Road
#5

City

Waukesha

State

WI

Zip Code

53186-6996

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pro Media, Inc.

Occupation

account executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 0

Transaction ID: A47F962EDF90D41BF869

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Anne Dolce

Mailing Address 333 Massachusetts Avenue
6

City

Arlington

State

MA

Zip Code

02474-8332

FEC ID number of contributing
federal political committee.

C

Name of Employer
T&T Marketing, Inc.

Occupation

Bookkeeper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 0

Transaction ID: A31B6B1C74DF14ACF88D

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Donald Miller

Mailing Address 155 S Queenscliff Cir

City

Spring

State

TX

Zip Code

77382-1769

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 0

Transaction ID: AC295D9B73BA844A48F2

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Dave Sweeney

Mailing Address PO Box 1143

City

San Juan Bautista

State

CA

Zip Code

95045-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. Marin Corps + Semico-
nductor manuf

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 0

Transaction ID: A8331F97DED9A45D3A68

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

ray larkin Jr.

Mailing Address 100 warwick ct

City

Alamo

State

CA

Zip Code

94507-1754

FEC ID number of contributing
federal political committee.

C

Name of Employer
Align technology

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 0

Transaction ID: A88ED5D6B1C974AD7822

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Bonnie Zylstra

Mailing Address 14745 Merriltown Rd Apt 5624

City

Austin

State

TX

Zip Code

78728-5765

FEC ID number of contributing
federal political committee.**C**Name of Employer
Internal Revenue Service

Occupation

Tax Examiner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	0

Transaction ID: AEA280F17079D4A488D9

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

RONALD CRESSWELL

Mailing Address 1968 BOULDER DR

City

Ann Arbor

State

MI

Zip Code

48104-4164

FEC ID number of contributing
federal political committee.**C**Name of Employer
Retired

Occupation

Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	0

Transaction ID: A131697F79CDE4D7AA09

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Jerome Sheridan

Mailing Address 17103 Lost Cypress

City

Cypress

State

TX

Zip Code

77429-1502

FEC ID number of contributing
federal political committee.**C**Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	0

Transaction ID: AB1498411B09A4EE1857

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

Lake Oswego

State

OR

Zip Code

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

Transaction ID: A7BC7537788434CF09CE

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Raymond Boggess

Mailing Address 1644 Oro Vista Rd
Apt. 244

City

San Diego

State

CA

Zip Code

92154-4034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Naval Medical Center San
DiegoOccupation
Facility Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

Transaction ID: A5767AB3E2E6F475892D

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Ken Pring

Mailing Address 408 Wildwood Rd

City

Ronkonkoma

State

NY

Zip Code

11779-5117

FEC ID number of contributing
federal political committee.

C

Name of Employer
NonOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

Transaction ID: A2FA0BB63BBE24133885

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

vernun bakkum

Mailing Address po box 178

City

Massena

State

NY

Zip Code

13662-0178

FEC ID number of contributing
federal political committee.

C

Name of Employer
GMOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	0

Transaction ID: AE4D115D1E7D04B06B2D

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Quang Do

Mailing Address 3504 Canyon Rd.

City

Grand Prairie

State

TX

Zip Code

75052-7851

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quang DoOccupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	0

Transaction ID: AAA853994FE0C4361938

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

edmund kaim

Mailing Address 2017 merrimac dr

City

Stafford

State

VA

Zip Code

22554-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	0

Transaction ID: A8E0F58D6E33E4F148C2

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Henri Knipper

Mailing Address 710 E 8th

City

Georgetown

State

TX

Zip Code

78626-6010

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 1 0

Transaction ID: AE594E15AFA5C4E1FA81

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

jon sprinkle

Mailing Address 299 jewel rd

City

Lufkin

State

TX

Zip Code

75904-8416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sound Techs

Occupation

sound eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 1 0

Transaction ID: A63A9790BDFEA41629F0

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

James Fazio

Mailing Address 881 Morningside Dr.

City

Mays Landing

State

NJ

Zip Code

08330-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fazio Shoes

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 1 0

Transaction ID: A5FB2C30AF7B549FDADD

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Peter Jones

Mailing Address 3 Waterway Court
7A

City State Zip Code
Spring TX 77380-2685

FEC ID number of contributing
federal political committee.

C

Name of Employer
P.E.M.Tooling Inc.

Occupation
General Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 0

Transaction ID: AE14ECC1665C443628E7

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Richard Gable

Mailing Address 4515 Willard Ave., Apt. S2318

City State Zip Code
Chevy Chase MD 20815-3631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Trident Systems Inc

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 0

Transaction ID: AD07D4733ED5C4EA281D

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Ronald Devito

Mailing Address 26 Clinton Ave.

City State Zip Code
Staten Island NY 10301-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con Edison of NY

Occupation
LAN Infrastructure Project Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.99

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 0

Transaction ID: A65929BF098684E7DBFC

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Gary Byers

Mailing Address 915 Walnut St., Apt 205A

City

Rock Springs

State

WY

Zip Code

82901-7133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Project manager - Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: AC98FF01D6ABD4A47912

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Joseph Georgusis

Mailing Address 3421 N Causeway Blvd
Ste 802

City

Metairie

State

LA

Zip Code

70002-3746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Park Investments, Ltd

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: ACE8B3E82430F4BBF924

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Deborah Palmer

Mailing Address 775 Twin Oaks Drive Apt 4

City

Decatur

State

GA

Zip Code

30030-4027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pediatrix Medical Group

Occupation

Physician Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: A5F83A10A2E5F49C68A6

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Adrienne Merrill

Mailing Address 6936 Kings Harbor Drive

City

Rancho Palos Verde

State

CA

Zip Code

90275-4624

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: A09BB2FBA46224129AD9

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Constance Barton

Mailing Address 7355 S. Alkire St
305

City

Littleton

State

CO

Zip Code

80127-7529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Exempla Healthcare

Occupation
software engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: AE9CD8B23F8294B9E8CE

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ralph A Abelt

Mailing Address P O Box 1588

City

Exton

State

PA

Zip Code

19341-0138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 1 0

Transaction ID: AB0B4001F8D204FDA8DA

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Michael E. Newell

Mailing Address 300 Anderson St.

City

Hackensack

State

NJ

Zip Code

07601-3668

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 1 0

Transaction ID: A811DCA70F2744509948

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert Newton Bloch

Mailing Address 2714 Divisadero St.

City

San Francisco

State

CA

Zip Code

94123-4623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 1 0

Transaction ID: A8AAA5743ABB74899841

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr Robinson S Brown, III

Mailing Address 3600 Woodside Rd

City

Louisville

State

KY

Zip Code

40222-5963

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 1 0

Transaction ID: A74637F9302074496B4E

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Joy Bollinger

Mailing Address PO BOX 250

City

Lockport

State

LA

Zip Code

70374-0250

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	0

Transaction ID: ABEF9E1949BF5455BBFD

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Thomas Chanteloup

Mailing Address 11301 Village Brook Drive
2417

City

Cincinnati

State

OH

Zip Code

45249-2094

FEC ID number of contributing
federal political committee.

C

Name of Employer
Omya, Inc.Occupation
SAP Application Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	0

Transaction ID: AFE63D812313F4E53912

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Donald Bollinger

Mailing Address PO BOX 250

City

Lockport

State

LA

Zip Code

70374-0250

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bollinger Shipyards, Inc.Occupation
Chairman/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	0

Transaction ID: A242D413E224548CB961

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Ontavus Thomas

Mailing Address 1752 Somerfield Lane

City

Crystal Lake

State

IL

Zip Code

60014-2040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance

Occupation

Computer Network Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

Transaction ID: AFACE255C3F004EB1802

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Teresa Wickham

Mailing Address 1583 Regatta Drive

City

Fernandina Beach

State

FL

Zip Code

32034-5558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Encore Forwarding, Inc.

Occupation

Intl Freight Forwarder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

Transaction ID: A8723DE9F084F4A9E858

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Gloria Williams

Mailing Address 1738 Balsam Ave

City

Kissimmee

State

FL

Zip Code

34758-2346

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

Transaction ID: A0A519BA88A8343D6B60

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Ronald Shuster

Mailing Address 43 Shirley road

City

Hatboro

State

PA

Zip Code

19040-2019

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired 2003 - Boeing Co.

Occupation

retired 2003 - Mfg Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A149B946A071E42139B4

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard A Baker

Mailing Address PO BOX 972

City

Lake Oswego

State

OR

Zip Code

97034-0107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A8CFE665870C64F0E98C

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

John Cal Crandall

Mailing Address 4584 Forest Creek Dr

City

Kalamazoo

State

MI

Zip Code

49009-9604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A9EA576FD7E9546EC8A0

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Beverly A Nelson

Mailing Address 2062 Berks Rd

City

Lansdale

State

PA

Zip Code

19446-5928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A4D044B8D4E844766B62

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

John Gummere

Mailing Address 27 Poplar Hill Dr

City

Farmington

State

CT

Zip Code

06032-2419

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A1899BB39EC9C425F898

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Mrs Alice V Baumgartner

Mailing Address 2886 Highland Ave

City

Broomall

State

PA

Zip Code

19008-1059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A63A96E335EE444F893A

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Mr Richard Harold Lynch, M.D. F.A.C

Mailing Address 842 Country Lane

City

Houston

State

TX

Zip Code

77024-3106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A2E2C9123725448F38D1

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Kathleen Hanko

Mailing Address 1011 Guthrie Road
#5

City

Waukesha

State

WI

Zip Code

53186-6996

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pro Media, Inc.

Occupation

account executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A85D532EC37454291BBF

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

adam newton

Mailing Address 3368 shore parkway 4a

City

Brooklyn

State

NY

Zip Code

11235-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer
USPS

Occupation

Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A5DA169B14F4043F9BD4

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Canizaro

Mailing Address 500 Northline

City

Metairie

State

LA

Zip Code

70005-4436

FEC ID number of contributing
federal political committee.

C

Name of Employer
FirstTrustCorporation; Co-
rporate Capit

Occupation

Banker and Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A35E224C241CC4AAE8A9

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Michael Chalmers

Mailing Address 28053 Kenton Lane

City

Santa Clarita

State

CA

Zip Code

91350-3929

FEC ID number of contributing
federal political committee.

C

Name of Employer
BGT

Occupation

BGT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: AF5E473B047AC49FCA9B

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Kimberly Melen, MD

Mailing Address 401 IRONWOOD DRIVE

City

Canonsburg

State

PA

Zip Code

15317-9570

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF PITTSBURGH
MEDICAL CENTE

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: AAE720F8801544DC4834

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

194061.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 112

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Jim Tracy State Senate Account

Mailing Address PO Box 332166

City

Murfreesboro

State

TN

Zip Code

37133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: A9AED7A9A771D48ED949

Amount of Each Receipt this Period

1000.00

The Committee confirmed
with campaign that contri-
bution contains only fed.
permissible funds. 103.3b.

B.

Full Name (Last, First, Middle Initial)

Faulk for Senate Committee

Mailing Address PO Box 2080

City

Church Hill

State

TN

Zip Code

37642

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 8 / 2 0 1 0

Transaction ID: AA5254E3F7F6A41B5B08

Amount of Each Receipt this Period

1000.00

contribution from committ-
ee

The Committee confirmed
with campaign that contri-
bution contains only fed.
permissible funds. 103.3b.

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 76 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) BC Scooter Clippard	Transaction ID: B694025DF860349CF929 Date of Disbursement																				
Mailing Address 2315 Abbott Martin Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	3		2	0	1	0												
City Nashville State TN Zip Code 37215-1919	Amount of Each Disbursement this Period																				
Purpose of Disbursement In-kind: In-kind food and drink Candidate Name	<table border="1"> <tr> <td colspan="10">1718.51</td> </tr> </table>	1718.51																			
1718.51																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: All2010 Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Timothy Crawford	Transaction ID: B97C8BC24AFB14BED8CE Date of Disbursement																				
Mailing Address 6165 Mori St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Mc Lean State VA Zip Code 22101-3148	Amount of Each Disbursement this Period																				
Purpose of Disbursement finance, treasurer consulting Candidate Name	<table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>	10000.00																			
10000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Andrew Davis	Transaction ID: BABDB9B79B5704EE1BD2 Date of Disbursement																				
Mailing Address 811 26th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Sacramento State CA Zip Code 95816-4206	Amount of Each Disbursement this Period																				
Purpose of Disbursement Political and Candidate Research Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">7500.00</td> </tr> </table>	7500.00																			
7500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

19218.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 77 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Kim Daniels	Transaction ID: B545635BA57C649D5AD4 Date of Disbursement																				
Mailing Address 7821 Stratford Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Bethesda State MD Zip Code 20814-1339	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">7000.00</td> </tr> </table>	7000.00																			
7000.00																					
Purpose of Disbursement Consulting, State, Local and Federal Issues Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Pamela Pryor	Transaction ID: B7F01CE7A4D6C4FA2A86 Date of Disbursement																				
Mailing Address 5300 Columbia Pike #102	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Arlington State VA Zip Code 22204-3118	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">6000.00</td> </tr> </table>	6000.00																			
6000.00																					
Purpose of Disbursement consulting, media and coalitions Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ivy Frye	Transaction ID: B248D07B2BF4C49D283B Date of Disbursement																				
Mailing Address 201 E Danna Ave #D	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Wasilla State AK Zip Code 99654-6421	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Purpose of Disbursement Clerical, Correspondence Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
SUBTOTAL of Disbursements This Page (optional) ►	<table border="1"> <tr> <td>18000.00</td> </tr> </table>	18000.00																			
18000.00																					
TOTAL This Period (last page this line number only) ►	<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 78 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Orion Strategies</p> <p>Mailing Address 918 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Consulting Issues</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B00D9A180552F475F831</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10000.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Callisto Consulting LLC</p> <p>Mailing Address 904 D Street</p> <p>City Millville State NJ Zip Code 08332</p> <p>Purpose of Disbursement Consulting, Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA39ACEC817F54E68B3E</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4000.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) NorthStar Strategies</p> <p>Mailing Address 1714 Osage Street</p> <p>City Alexandria State VA Zip Code 22302-2624</p> <p>Purpose of Disbursement Consulting Logistics, Travel, Advance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA0B0CF0F53E645C09FB</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20000.00"/></p>
<p>SUBTOTAL of Disbursements This Page (optional) ► <input type="text" value="34000.00"/></p> <p>TOTAL This Period (last page this line number only) ► <input type="text"/></p>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 79 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) IzzyLene Consulting	Transaction ID: B365D6A5B574C4709BC6 Date of Disbursement																				
Mailing Address 16235 Headlands Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Anchorage State AK Zip Code 99516-7561	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting-Media Relations	<table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>	10000.00																			
10000.00																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Aries Petra Consulting LLC	Transaction ID: B2785048551764DD3856 Date of Disbursement																				
Mailing Address 12728 Directors Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Woodbridge State VA Zip Code 22192	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting Internet, Grassroots	<table border="1"> <tr> <td colspan="10">6000.00</td> </tr> </table>	6000.00																			
6000.00																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) AT & T Mobility	Transaction ID: BD9517CDDFA88E4F12B11 Date of Disbursement																				
Mailing Address PO Box 6463	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	6		2	0	1	0												
City Carol Stream State IL Zip Code 60197-6463	Amount of Each Disbursement this Period																				
Purpose of Disbursement mobile phone	<table border="1"> <tr> <td colspan="10">330.34</td> </tr> </table>	330.34																			
330.34																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

16330.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 80 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Nico & LaLa	Transaction ID: B65EFC87454C345749D2 Date of Disbursement																				
Mailing Address 4502 Idaho Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	6		2	0	1	0
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0	1		0	6		2	0	1	0												
City Nashville State TN Zip Code 37209	Amount of Each Disbursement this Period																				
Purpose of Disbursement Design and Printing Candidate Name	<table border="1"> <tr> <td colspan="10">1243.87</td> </tr> </table>	1243.87																			
1243.87																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Shealah Craighead	Transaction ID: B26EF27000B0540D6950 Date of Disbursement																				
Mailing Address 62 Lords Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	6		2	0	1	0
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0	1		0	6		2	0	1	0												
City Deep River State CT Zip Code 06417-2007	Amount of Each Disbursement this Period																				
Purpose of Disbursement Photography Candidate Name	<table border="1"> <tr> <td colspan="10">11596.00</td> </tr> </table>	11596.00																			
11596.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Upstream Communications	Transaction ID: B31A7F56FC5A04F73BFB Date of Disbursement																				
Mailing Address 1609 Shoal Creek Blvd. Suite 203	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	1	0												
City Austin State TX Zip Code 78701	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">11519.19</td> </tr> </table>	11519.19																			
11519.19																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

24359.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 81 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) EDONATION.COM/Campaign Solutions	Transaction ID: BC59159A306734F889A2 Date of Disbursement																				
Mailing Address 118 N. St. Asaph St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	1	0												
City Alexandria State VA Zip Code 22314-3110	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">1248.40</td> </tr> </table>	1248.40																			
1248.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Callisto Consulting LLC	Transaction ID: B12B9B2CD7FAC4B54A7D Date of Disbursement																				
Mailing Address 904 D Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	1	0												
City Millville State NJ Zip Code 08332	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">4000.00</td> </tr> </table>	4000.00																			
4000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Orion Strategies	Transaction ID: B7A7193479EEF4C14A41 Date of Disbursement																				
Mailing Address 918 Pennsylvania Ave., SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	1	0												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting/Issues Political Candidate Name	<table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>	10000.00																			
10000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

15248.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Aries Petra Consulting LLC	Transaction ID: B4DD9907816EE49ACAD7 Date of Disbursement																				
Mailing Address 12728 Directors Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	1	0												
City Woodbridge State VA Zip Code 22192	Amount of Each Disbursement this Period																				
Purpose of Disbursement consulting internet, grassroots Candidate Name	<table border="1"> <tr> <td colspan="10">6000.00</td> </tr> </table>	6000.00																			
6000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) AT & T Mobility	Transaction ID: B77E6DA0E236B4FB58A7 Date of Disbursement																				
Mailing Address PO Box 6463	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	1	0												
City Carol Stream State IL Zip Code 60197-6463	Amount of Each Disbursement this Period																				
Purpose of Disbursement mobile phone Candidate Name	<table border="1"> <tr> <td colspan="10">332.06</td> </tr> </table>	332.06																			
332.06																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Clapp, Peterson, Van Flein, Tiemessen, Thorsness LLC	Transaction ID: BC758D049503649FABEE Date of Disbursement																				
Mailing Address 711 H St. Suite 620	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	1	0												
City Anchorage State AK Zip Code 99501	Amount of Each Disbursement this Period																				
Purpose of Disbursement legal services Candidate Name	<table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>	10000.00																			
10000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

16332.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) NorthStar Strategies	Transaction ID: BE4FC2B7F312D466B982 Date of Disbursement
Mailing Address 1714 Osage Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div>
City Alexandria State VA Zip Code 22302-2624	Amount of Each Disbursement this Period
Purpose of Disbursement consulting/ logistics and political Candidate Name	<div>20000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Baker & Hostetler	Transaction ID: B76A4B10C6B024521A7F Date of Disbursement
Mailing Address 1050 Connecticut Ave., NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20036-5308	Amount of Each Disbursement this Period
Purpose of Disbursement legal services Candidate Name	<div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Timothy Crawford	Transaction ID: B3633ED5620664B46941 Date of Disbursement
Mailing Address 6165 Mori St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div>
City Mc Lean State VA Zip Code 22101-3148	Amount of Each Disbursement this Period
Purpose of Disbursement consulting-fundraising, treasurer Candidate Name	<div>10000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

31500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 84 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Kim Daniels	Transaction ID: B126F06C4B1274693981 Date of Disbursement
Mailing Address 7821 Stratford Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div>
City Bethesda State MD Zip Code 20814-1339	Amount of Each Disbursement this Period
Purpose of Disbursement consulting/issue and political Candidate Name	<div>7000.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Ivy Frye	Transaction ID: BC87AE1A1D2D44F0C9CD Date of Disbursement
Mailing Address 201 E Danna Ave #D	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div>
City Wasilla State AK Zip Code 99654-6421	Amount of Each Disbursement this Period
Purpose of Disbursement consulting-clerical & correspondence Candidate Name	<div>5000.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Pamela Pryor	Transaction ID: B0D759A7CA4EB4C039D3 Date of Disbursement
Mailing Address 5300 Columbia Pike #102	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div>
City Arlington State VA Zip Code 22204-3118	Amount of Each Disbursement this Period
Purpose of Disbursement consulting coalitions Candidate Name	<div>6000.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<div>Category/Type</div>
SUBTOTAL of Disbursements This Page (optional)	<div>18000.00</div>
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 85 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Sarah PAC

A.	Full Name (Last, First, Middle Initial) Andrew Davis	Transaction ID: B4338199E50424DAFBAF Date of Disbursement MM / DD / YYYY 02 / 01 / 2010
	Mailing Address 811 26th Street	
	City Sacramento State CA Zip Code 95816-4206	Amount of Each Disbursement this Period 7500.00
	Purpose of Disbursement Political and Candidate Research Consulting	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Windsor Court Hotel	Transaction ID: B63BE97F9EA32484DA36 Date of Disbursement MM / DD / YYYY 02 / 02 / 2010
	Mailing Address 300 Gravier Street	
	City New Orleans State LA Zip Code 70130	Amount of Each Disbursement this Period 8000.00
	Purpose of Disbursement deposit on hotel lodging and meeting rooms	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) NorthStar Strategies	Transaction ID: BC875816CF6D241C78C9 Date of Disbursement MM / DD / YYYY 03 / 01 / 2010
	Mailing Address 1714 Osage Street	
	City Alexandria State VA Zip Code 22302-2624	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement consulting/political and logistical	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)		25500.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Aries Petra Consulting LLC

Mailing Address 12728 Directors Loop

City State Zip Code
Woodbridge VA 22192

Purpose of Disbursement
consulting internet, grassroots

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B36B08191DD60483A86E

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2010

Amount of Each Disbursement this Period

6000.00

B.

Full Name (Last, First, Middle Initial)

Clapp, Peterson, Van Flein, Tiemessen, Thorsness LLC

Mailing Address 711 H St.
Suite 620

City State Zip Code
Anchorage AK 99501

Purpose of Disbursement
legal services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B9AA96347B48249549D7

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2010

Amount of Each Disbursement this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Izzylene Consulting

Mailing Address 16235 Headlands Circle

City State Zip Code
Anchorage AK 99516-7561

Purpose of Disbursement
consulting-media

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B4BB6515DF9A1446885C

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2010

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

26000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Orion Strategies</p> <p>Mailing Address 918 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement consulting-issues & political</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB9973EEEE6F24BC49CF</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10000.00"/></p>	
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Timothy Crawford</p> <p>Mailing Address 6165 Mori St.</p> <p>City Mc Lean State VA Zip Code 22101-3148</p> <p>Purpose of Disbursement consulting, fundraising, treasurer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B243F346017E940EAA83</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10000.00"/></p>	
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Andrew Davis</p> <p>Mailing Address 811 26th Street</p> <p>City Sacramento State CA Zip Code 95816-4206</p> <p>Purpose of Disbursement consulting-political and candidate research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8C7E539CF485402AA78</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7500.00"/></p>	
<p>SUBTOTAL of Disbursements This Page (optional)</p>		<p><input type="text" value="27500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>		<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A.

Full Name (Last, First, Middle Initial)
EDONATION.COM/Campaign Solutions

Mailing Address 118 N. St. Asaph St.

City Alexandria State VA Zip Code 22314-3110

Purpose of Disbursement
Internet Fundraising

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BC1C536D441DD4177B16

Date of Disbursement

03 / 01 / 2010

Amount of Each Disbursement this Period

952.18

B.

Full Name (Last, First, Middle Initial)
Ivy Frye

Mailing Address 201 E Danna Ave #D

City Wasilla State AK Zip Code 99654-6421

Purpose of Disbursement
consulting, clerical & correspondence

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B3363D13CF66243C5B9A

Date of Disbursement

03 / 01 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Robyn Engibous

Mailing Address 140 W 10th Ave.
#10

City Anchorage State AK Zip Code 99501-3659

Purpose of Disbursement
Scheduling consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B5843652BF146471B996

Date of Disbursement

03 / 01 / 2010

Amount of Each Disbursement this Period

5416.66

SUBTOTAL of Disbursements This Page (optional)

11368.84

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Kim Daniels Mailing Address 7821 Stratford Rd.	Transaction ID: B174E8ABA12EC4AB4A34 Date of Disbursement <div> <div>03</div> <div>01</div> <div>2010</div> </div>
City Bethesda State MD Zip Code 20814-1339 Purpose of Disbursement consulting-issues, political Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>7000.00</div>
B. Full Name (Last, First, Middle Initial) Lindsay Hayes Mailing Address 414 E. Nelson Ave. City Alexandria State VA Zip Code 22301-1613 Purpose of Disbursement speech writing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD5E522CF6AA1481B813 Date of Disbursement <div> <div>03</div> <div>01</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>2000.00</div>
C. Full Name (Last, First, Middle Initial) Pamela Pryor Mailing Address 5300 Columbia Pike #102 City Arlington State VA Zip Code 22204-3118 Purpose of Disbursement coalitions consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE7F97B4C62AD4DC09DB Date of Disbursement <div> <div>03</div> <div>01</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>6000.00</div>
SUBTOTAL of Disbursements This Page (optional) ▶	<div>15000.00</div>
TOTAL This Period (last page this line number only) ▶	<div></div>

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Upstream Communications</p> <p>Mailing Address 1609 Shoal Creek Blvd. Suite 203</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement Internet and Credit Card Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7801ACDF7C93497CBD3</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 11315.16</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Grey Strategies</p> <p>Mailing Address 386 Eastmoor Blvd.</p> <p>City Columbus State OH Zip Code 43209</p> <p>Purpose of Disbursement consulting-media, logistics</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC1C7C12FDE2C4DA1B16</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 10000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AT & T Mobility</p> <p>Mailing Address PO Box 6463</p> <p>City Carol Stream State IL Zip Code 60197-6463</p> <p>Purpose of Disbursement Mobile Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2B845CD2EDA54DD4A70</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 336.45</p>

SUBTOTAL of Disbursements This Page (optional)

21651.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Ms. Anahita Nemat	Transaction ID: B7BE2A863E75A41FFAB1 Date of Disbursement
Mailing Address 4242 Park Verdi	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 1 0</div> </div>
City Calabasas State CA Zip Code 91302-2831	Amount of Each Disbursement this Period
Purpose of Disbursement clerical, part time Candidate Name	<div> <div>2635.13</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Aristotle International	Transaction ID: B18B8F3BB568B4385A2B Date of Disbursement
Mailing Address 205 Pennsylvania Ave., SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period
Purpose of Disbursement Record keeping and FEC compliance Candidate Name	<div> <div>6000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Postmaster, USPS	Transaction ID: BF991E2D445DC4320942 Date of Disbursement
Mailing Address North Station 2200 N. George Mason Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 0</div> </div>
City Arlington State VA Zip Code 22207	Amount of Each Disbursement this Period
Purpose of Disbursement BRE Account Postage Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

9635.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bigeye Direct</p> <p>Mailing Address 13860 Redskin Dr.</p> <p>City Herndon State VA Zip Code 20170</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B60C9495CF57C450B85B</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="31263.47"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Washington Intelligence Bureau</p> <p>Mailing Address 4128 Pepsi Place</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement PO Box and BRE for Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5DC0253FCB2C4C0FB62</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1530.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Advanced Design</p> <p>Mailing Address PO Box 670382</p> <p>City Chugiak State AK Zip Code 99567</p> <p>Purpose of Disbursement Domain Name Purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B51813D37C613489A8AA</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="709.85"/></p>

SUBTOTAL of Disbursements This Page (optional)

33503.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Air Partner Private Jets</p> <p>Mailing Address 1100 Lee Wagener Blvd. Suite 328</p> <p>City Ft. Lauderdale State FL Zip Code 33315</p> <p>Purpose of Disbursement De-Icing Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD743418E50244A26886</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>7321.65</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Air Partner Private Jets</p> <p>Mailing Address 1100 Lee Wagener Blvd. Suite 328</p> <p>City Ft. Lauderdale State FL Zip Code 33315</p> <p>Purpose of Disbursement De-Icing Cost</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5AB1C9F40ACB42EB821</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>7321.65</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445-A McLaughlin Ave.</p> <p>City McLean State VA Zip Code 22101</p> <p>Purpose of Disbursement wire fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2D53F368A8544FBD829</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>20.00</div> </div> </p>

SUBTOTAL of Disbursements This Page (optional)

14663.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 94 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445-A McLaughlin Ave.</p> <p>City McLean State VA Zip Code 22101</p> <p>Purpose of Disbursement stop payment charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B73EC024A797F4C3388B</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Timothy Crawford</p> <p>Mailing Address 6165 Mori St.</p> <p>City Mc Lean State VA Zip Code 22101-3148</p> <p>Purpose of Disbursement Hotels, Travel, Postage,</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFE32CA7107C042DFBF7</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7339.14"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 77 West Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement Airline Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA72ACA873BB24DB1BBD</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1187.30"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

7364.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A.

Full Name (Last, First, Middle Initial)
U.S. Airways

Mailing Address 111 West Rio Salado Parkway

City State Zip Code
Tempe AZ 85281

Purpose of Disbursement
airline travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BD5044E939ECA4EF89EC

Date of Disbursement

11 / 21 / 2009

Amount of Each Disbursement this Period

344.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
The Cincinnati Hotel

Mailing Address 601 Vine Street

City State Zip Code
Cincinnati OH 45202

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0E77C786B3834DA88A6

Date of Disbursement

11 / 21 / 2009

Amount of Each Disbursement this Period

371.61

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
The Cincinnati Hotel

Mailing Address 601 Vine Street

City State Zip Code
Cincinnati OH 45202

Purpose of Disbursement
Hotel Event

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B59847B7DF8034354BBE

Date of Disbursement

11 / 21 / 2009

Amount of Each Disbursement this Period

737.71

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 77 West Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BCFA169EB20844D63880</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="345.60"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Omni Hotel Jacksonville</p> <p>Mailing Address 245 Water Street</p> <p>City Jacksonville State FL Zip Code 32202</p> <p>Purpose of Disbursement lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B169B2E172FF746D4903</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="228.94"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 77 West Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement airline ticket</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B43282FE1A6EF4EB6976</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="380.20"/></p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► <input type="text" value="0.00"/></p>	
<p>TOTAL This Period (last page this line number only) ► <input type="text"/></p>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Marriott Courtyard Richland</p> <p>Mailing Address 480 Columbia Point Dr.</p> <p>City Richland State WA Zip Code 99352</p> <p>Purpose of Disbursement lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1D5E1680C041424DAA8</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="243.46"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ritz Carlton Phoenix</p> <p>Mailing Address 2401 E. Camelback Rd.</p> <p>City Phoenix State AZ Zip Code 85016</p> <p>Purpose of Disbursement lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9B46E44879B541C4BBC</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="446.84"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rosewood Crescent Hotel</p> <p>Mailing Address 400 Crescent Court</p> <p>City Dallas State TX Zip Code 75201</p> <p>Purpose of Disbursement lodging, meal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA40AAB13DD7E430EB71</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="802.94"/></p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► <input type="text" value="0.00"/></p>	
<p>TOTAL This Period (last page this line number only) ► <input type="text"/></p>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rosewood Crescent Hotel</p> <p>Mailing Address 400 Crescent Court</p> <p>City Dallas State TX Zip Code 75201</p> <p>Purpose of Disbursement lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1AD825866FFA4535A34</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 7 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>840.53</div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ivy Frye</p> <p>Mailing Address 201 E Danna Ave #D</p> <p>City Wasilla State AK Zip Code 99654-6421</p> <p>Purpose of Disbursement shipping, postage, printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB1D870E231CA48C5B22</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1549.94</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Postmaster, Wasilla</p> <p>Mailing Address Wasilla MPO</p> <p>City Wasilla State AK Zip Code 99654</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B62676DBEC76E4AB4AA5</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 9 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>98.70</div> </p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ►

1549.94

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Postmaster, Wasilla	Transaction ID: B1D878702F11844FBA11 Date of Disbursement
Mailing Address Wasilla MPO	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 1 / 2 0 1 0</div> </div>
City Wasilla State AK Zip Code 99654	Amount of Each Disbursement this Period
Purpose of Disbursement postage Candidate Name	<div> <div>10.70</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Postmaster, Wasilla	Transaction ID: BDC87AD18084C4EEBB07 Date of Disbursement
Mailing Address Wasilla MPO	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div>
City Wasilla State AK Zip Code 99654	Amount of Each Disbursement this Period
Purpose of Disbursement postage Candidate Name	<div> <div>152.25</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) UPS Store	Transaction ID: BEED06342FD654DCBB94 Date of Disbursement
Mailing Address 1150 S. Colony Way Suite 3	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div>
City Palmer State AK Zip Code 99645	Amount of Each Disbursement this Period
Purpose of Disbursement printing, office supplies Candidate Name	<div> <div>659.20</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) UPS Store</p> <p>Mailing Address 1150 S. Colony Way Suite 3</p> <p>City Palmer State AK Zip Code 99645</p> <p>Purpose of Disbursement copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB38F4712344848368EB</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 64.38</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Postmaster, Wasilla</p> <p>Mailing Address Wasilla MPO</p> <p>City Wasilla State AK Zip Code 99654</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B770E248EE9854380930</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 9.80</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Timothy Crawford</p> <p>Mailing Address 6165 Mori St.</p> <p>City Mc Lean State VA Zip Code 22101-3148</p> <p>Purpose of Disbursement postage, supplies, lodging, travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B81541E74915D4B73B4E</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 3334.24</p>

SUBTOTAL of Disbursements This Page (optional)

3334.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 101 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Postmaster, USPS</p> <p>Mailing Address North Station 2200 N. George Mason Dr.</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC851B79B321B4820B92</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.70"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Postmaster, USPS</p> <p>Mailing Address North Station 2200 N. George Mason Dr.</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC9DE52B6019942E3946</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.12"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 77 West Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement airline travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B0B548A90FC394BF9969</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="529.80"/></p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► <input type="text" value="0.00"/></p>	
<p>TOTAL This Period (last page this line number only) ► <input type="text"/></p>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 102 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Postmaster, USPS</p> <p>Mailing Address North Station 2200 N. George Mason Dr.</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFB43FB8823F64323939</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>3.99</div> </div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Enterprise Rental Car</p> <p>Mailing Address 600 Corporate Park Dr.</p> <p>City St. Louis State MO Zip Code 63105</p> <p>Purpose of Disbursement rental car</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B264E74BC862D4209805</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>268.02</div> </div> </p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 77 West Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement airline travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD87D817B7C9340CDB4E</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>1032.90</div> </div> </p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Sarah PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 104 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Visa/Bankcard Center	Transaction ID: B2E2F00769B274A40842 Date of Disbursement																				
Mailing Address PO Box 569200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	1	0												
City Dallas State TX Zip Code 75356	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card	<table border="1"> <tr> <td colspan="10">1672.24</td> </tr> </table>	1672.24																			
1672.24																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) UPS Billings	Transaction ID: B984595B77B9241B3A1E Date of Disbursement																				
Mailing Address 1302 24th St. W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	8		2	0	0	9												
City Billings State MT Zip Code 59102	Amount of Each Disbursement this Period																				
Purpose of Disbursement shipping	<table border="1"> <tr> <td colspan="10">298.49</td> </tr> </table>	298.49																			
298.49																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Hilton Hotel Minneapolis Airport	Transaction ID: BEABF7B95C9984D88B91 Date of Disbursement																				
Mailing Address 3800 American Blvd. East	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	8		2	0	0	9												
City Bloomington State MN Zip Code 55425	Amount of Each Disbursement this Period																				
Purpose of Disbursement lodging	<table border="1"> <tr> <td colspan="10">542.63</td> </tr> </table>	542.63																			
542.63																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1672.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 105 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Hotel Monaco Salt Lake City</p> <p>Mailing Address 15 West 200 South</p> <p>City Salt Lake City State UT Zip Code 84101</p> <p>Purpose of Disbursement lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD2575EB5BEAB44829E1</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>278.61</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	9	278.61
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	0		2	0	0	9													
278.61																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) UPS Georgia</p> <p>Mailing Address 59 Glen Lake Pkwy</p> <p>City Atlanta State GA Zip Code 30328</p> <p>Purpose of Disbursement shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9C36D5C7E4394BD0946</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>496.51</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	9	496.51
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	8		2	0	0	9													
496.51																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Visa/Bankcard Center</p> <p>Mailing Address PO Box 569200</p> <p>City Dallas State TX Zip Code 75356</p> <p>Purpose of Disbursement Lodging, Food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B31E15CD211C34EBFAC9</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>2308.79</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1	0	2308.79
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	1		2	0	1	0													
2308.79																						

SUBTOTAL of Disbursements This Page (optional)

2308.79

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC**A.**Full Name (Last, First, Middle Initial)
Peninsula Hotel NYC

Mailing Address 700 5th Avenue at 55th

City State Zip Code
New York NY 10019Purpose of Disbursement
lodging, meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BA9696937C3404B18B80

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	0

Amount of Each Disbursement this Period

2208.79

[MEMO ITEM]**B.**Full Name (Last, First, Middle Initial)
Ivy Frye

Mailing Address 201 E Danna Ave #D

City State Zip Code
Wasilla AK 99654-6421Purpose of Disbursement
printing, shipping, postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0E106758CED74274A95

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	6	/	2	0	1	0

Amount of Each Disbursement this Period

1531.96

C.Full Name (Last, First, Middle Initial)
UPS StoreMailing Address 1150 S. Colony Way
Suite 3City State Zip Code
Palmer AK 99645Purpose of Disbursement
printig

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BB538F5B32EB04E499C3

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	9

Amount of Each Disbursement this Period

489.25

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1531.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 107 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A.

Full Name (Last, First, Middle Initial)
UPS Store

Mailing Address 1150 S. Colony Way
Suite 3

City Palmer State AK Zip Code 99645

Purpose of Disbursement
printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B7EEA1BF2A3CD4BBF80E

Date of Disbursement

/ /

Amount of Each Disbursement this Period

499.55

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
UPS Store

Mailing Address 1150 S. Colony Way
Suite 3

City Palmer State AK Zip Code 99645

Purpose of Disbursement
printing, stationary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BBF11D4913B0040BC821

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.03

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Timothy Crawford

Mailing Address 6165 Mori St.

City Mc Lean State VA Zip Code 22101-3148

Purpose of Disbursement
Postage, shipping, travel, lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B90B320E931C6485AA12

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4295.37

SUBTOTAL of Disbursements This Page (optional)

4295.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address 1030 Delta Blvd.</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement airline travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B0ACDE169B6454FE4A3D</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2479.50"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Peninsula Hotel NYC</p> <p>Mailing Address 700 5th Avenue at 55th</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B713FF637F41645BEB84</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1263.22"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Postmaster, USPS</p> <p>Mailing Address North Station 2200 N. George Mason Dr.</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6B421D40963B4902B5F</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="117.72"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC**A.**Full Name (Last, First, Middle Initial)
Postmaster, USPSMailing Address North Station
2200 N. George Mason Dr.

City Arlington State VA Zip Code 22207

Purpose of Disbursement
postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B3418DBD20D73434097F

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	0

Amount of Each Disbursement this Period

58.88

[MEMO ITEM]**B.**Full Name (Last, First, Middle Initial)
Postmaster, USPSMailing Address North Station
2200 N. George Mason Dr.

City Arlington State VA Zip Code 22207

Purpose of Disbursement
postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BB4C0C1462BC84DC3B0D

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	0

Amount of Each Disbursement this Period

18.45

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

399867.25

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Duffy for Congress	Transaction ID: B59A1BABFCB6F4672B45 Date of Disbursement
Mailing Address PO Box 186	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 1 0</div> </div>
City Ashland State WI Zip Code 54806 Purpose of Disbursement Primary Campaign Candidate Name	Amount of Each Disbursement this Period <div>2500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Allen West for Congress	Transaction ID: B73E322CFD8D449C8A6D Date of Disbursement
Mailing Address PO Box 1028	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 1 0</div> </div>
City Deerfield State FL Zip Code 33441 Purpose of Disbursement Primary Candidate Name	Amount of Each Disbursement this Period <div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Kinzinger for Congress	Transaction ID: B89CA13DF6D7A4DCDBBF Date of Disbursement
Mailing Address PO Box 487	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 1 0</div> </div>
City New Lenox State IL Zip Code 60451 Purpose of Disbursement 2010 Primary Candidate Name	Amount of Each Disbursement this Period <div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
SUBTOTAL of Disbursements This Page (optional)	<div>4500.00</div>
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sarah PAC

A. Full Name (Last, First, Middle Initial) Rand Paul for US Senate Mailing Address 1332 Andrea Street	Transaction ID: B5AB6DEA2BDBB4566AC3 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	1	0										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	1		2	6		2	0	1	0																						
City Bowling Green State KY Zip Code 42104 Purpose of Disbursement Contribution to Senate Campaign Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																													
2000.00																															
B. Full Name (Last, First, Middle Initial) Vaughn Ward for Congress Mailing Address PO Box 1058 City Eagle State ID Zip Code 83616 Purpose of Disbursement 2010 Primary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B10B7368A7110457ABDB Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	8		2	0	1	0	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	3		2	8		2	0	1	0																						
1000.00																															
C. Full Name (Last, First, Middle Initial) Iraq Veterans for Congress Mailing Address PO Box 1998 City White Plains State NY Zip Code 10606 Purpose of Disbursement Contribution to PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) All2010 State: District:	Transaction ID: B1C8ACF566B854B379DA Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	8		2	0	1	0	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	3		2	8		2	0	1	0																						
1000.00																															
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">4000.00</td> </tr> </table>	4000.00																													
4000.00																															
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Sarah PAC

A.

Full Name (Last, First, Middle Initial)

Combat Veerans for Congress

Mailing Address 1925 Cetury Park East
Suite 2120

City State Zip Code
Los Angeles CA 90067

Purpose of Disbursement
PAC support

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

All2010

Transaction ID: B25E75339B2874E41AAF

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)